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## APPLICANTS

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*MH 3-2-06*

\*\* CONTINUING DATA \*\*\*\*\*

*none MH 3-2-06*

\*\* FOREIGN APPLICATIONS \*\*\*\*\*

*none MH 3-2-06*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

\*\* 02/19/2004

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY WI	<i>MH 3-2</i> SHEETS DRAWING 9	<i>MH 3-2</i> TOTAL CLAIMS 36	<i>MH</i> INDEPENDENT CLAIMS 4
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance	Verified and Acknowledged Examiner's Signature _____ Initials _____			

## ADDRESS

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## TITLE

Reduced-noise composite materials and disposable personal care devices employing same

FILING FEE  RECEIVED 1144	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue )
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